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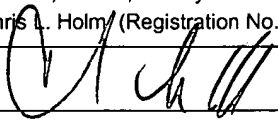
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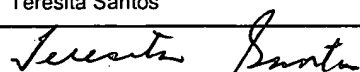
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<b>TRANSMITTAL FORM</b> <i>(to be used for all correspondence after initial filing)</i>	Application Number	09/818,886	
	Filing Date	March 27, 2001	
	First Named Inventor	YAMADA, et al.	
	Group Art Unit	2655	
	Examiner Name	Smits	
Total Number of Pages in This Submission	1	Attorney Docket Number	36409-01000

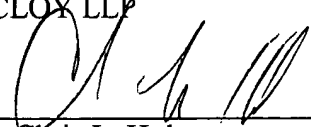
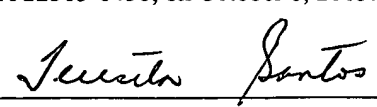
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ENCLOSURES (check all that apply)				
<input checked="" type="checkbox"/> Fee Transmittal Form  <input checked="" type="checkbox"/> Fee Attached  <input checked="" type="checkbox"/> Amendment / Response  <input type="checkbox"/> After Final  <input type="checkbox"/> Affidavits/declaration(s)  <input type="checkbox"/> Extension of Time Request  <input type="checkbox"/> Express Abandonment Request  <input type="checkbox"/> Information Disclosure Statement  <input type="checkbox"/> Certified Copy of Priority Document(s)  <input type="checkbox"/> Response to Missing Parts/ Incomplete Application  <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application)  <input type="checkbox"/> Drawing(s)  <input type="checkbox"/> Licensing-related Papers  <input type="checkbox"/> Petition  <input type="checkbox"/> Petition to Convert to a Provisional Application  <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address  <input type="checkbox"/> Terminal Disclaimer  <input type="checkbox"/> Request for Refund  <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group  <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences  <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)  <input type="checkbox"/> Proprietary Information  <input type="checkbox"/> Status Letter  <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):  <b>Check in the amount of \$330; Transmittal Form; and Amendment and Request for Reconsideration.</b>		
<table border="1"><tr><td>Remarks</td><td></td></tr></table>			Remarks	
Remarks				

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Milbank, Tweed, Hadley & McCloy LLP Chris L. Holm (Registration No. 39,227)
Signature	
Date	October 8, 2003

CERTIFICATE OF MAILING			
I hereby certify that this correspondence is being deposited with the United States Postal Service as Express Mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on this date: October 8, 2003			
Typed or printed name	Teresita Santos		
Signature		Date	October 8, 2003

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<b>Amendment Transmittal Letter (Large Entity)</b>		36409-01000	
Applicant(s): <b>OCT 08 2003</b>			
Serial No. 09/818,886	Filing Date March 27, 2001	Examiner Smits	Group Art Unit 2655
Invention: <p style="text-align: center;"><b>SPEECH SYNTHESIZING METHOD AND APPARATUS USING PROSODY CONTROL</b></p>			
<u>TO THE ASSISTANT COMMISSIONER FOR PATENTS:</u>		<b>RECEIVED</b> <b>OCT 20 2003</b> Technology Center 2600	
Transmitted herewith is an amendment in the above-identified application.			
The fee has been calculated and is transmitted as shown below.			
<b>CLAIMS AS AMENDED</b>			
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT
TOTAL CLAIMS	26    —	22    =	4
INDEP. CLAIMS	6    —	3    =	3
Multiple Dependent Claims (check if applicable) \$280			--
<b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT</b>			<b>\$330.00</b>
<input type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. 13-3250 in the amount of \$ _____. A duplicate copy of this sheet is enclosed. <input checked="" type="checkbox"/> A check in the amount of \$330.00 to cover the filing fee is enclosed. <input type="checkbox"/> The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 13-3250. A duplicate copy of this sheet is enclosed. <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16 (or credit overpayments). <input type="checkbox"/> Any patent application processing fees under 37 C.F.R. 1.17.			
<b><u>CERTIFICATE OF MAILING</u></b>		Dated: <u>October 8, 2003</u> Respectfully submitted,  MILBANK, TWEED, HADLEY & McCLOY LLP  By:  Chris L. Holm Reg. No. 39,227 1 Chase Manhattan Plaza New York, NY 10005-1413 (212) 530-5734 Attorneys for Applicant	
I hereby certify that this correspondence is being deposited with the United States Postal Service, with sufficient postage, as Express Mail (Label No. EV 252565754 US) in an envelope addressed to:, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on October 8, 2003:   _____ Signature  _____ Teresita Santos			